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JUN 1 1 2014
S.D. SEC. OF STATE

Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-2797

APPLICATION FOR CERTIFICATE OF AUTHORIZATION TO PROVIDE POSTSECONDARY EDUCATION

Please mark the appro	priate box:					
☑ INITIAL APPLICATION		☐ CHANGI	☐ CHANGE OF PRIMARY ADDRESS			
☐ CHANGE	OF NAME	☐ CHANG	CHANGE IN ADDITIONAL SITES (ATTACHMENT A)			
☐ CHANGE	IN ACCREDITATION	☐ OTHER	☐ OTHER CHANGE(S)			
1. Name of Applicant Duquesne U	(the institutional name under w Iniversity	hich postsecond	dary educationa	l programs are provided):		
2. Applicant's Main A	ddress (Additional sites listed o	n Attachment A): -			
(Street Address)				15282		
Pittsburgh		PA				
(City)		(Sta	te)	(ZIP Code)		
www.duq.ed	lu					
(Website)						
3. Contact Person:	Dr. Alexandra Greg	jory	As	ssociate Provost for Acader	nic Affairs	
	(Name)		•	tle)		
	412-396-4525		4	412-396-1393		
	(Telephone Number)		(Fax Number)			
	gregorya@duq.edu	1				
	(Email Address)					
Does the Applica	nt operate at other sites than th	e address stated	i above?	☑ YES □ NO		

If "YES", please be advised that Attachment A to this Application must be completed, which shall comprise part of this Application, and any subsequent changes to the information provided in Attachment A must be submitted with a revised Application to the Secretary of State Office, within thirty (30) days of such change.

If "	YES", please indicate the following:					
	ongregation of the Holy Spirit	Province of the United State	S			
	arent Organization Name)					
63	320 Brush Run Rd.					
(St	reet Address)					
B	ethel Park	PA	15102-2214			
(Ci	ity)	(State)	(ZIP Code)			
s. Is the A	Applicant an instrumentality of the State	under the jurisdiction of the South Da	kota Board of Regents?			
	lyes 🛛 no	ne Applicant is either (check one of the				
	⊠ An instrumentality of another s State Pennsylvania	state (please list the state agency which Agency Departme	th has jurisdiction over Applicant)			
	Address 333 Market	St.				
	City Harrisburg					
		Contact Phone Number 717-783-6788				
	Contact Website WWW.	nde state palus				
	Contact Website					
	Legally established to operate	e in South Dakota as a private busines	s entity			
	South Dakota Corporate	ID				
	South Dakota Corporate	•	· ——•			
	☐ Legally established to operate	e in South Dakota as a not-for-profit co	orporation.			
	South Dakota Corporate	ID				
	South Dakota Corporate	Name				
7. Is the	Applicant accredited by an accrediting	agency recognized by the United State	es Department of Education?			
2	⊴ yes					
	Accrediting Agency: Middle	e States Commission on Hig	her Education			
	3264 Market St					
	(Street Address)					
	Philadelphia	PA	19104			

Effective date of most recent grant of accreditation:

June 26, 2008 (Last reaffirmed Nov. 21, 2013)

Term or expiration date of most recent accreditation:

2017/2018

NO X

Application submission must include documentation of an affiliation agreement whose terms make another postsecondary institution, which is accredited by an accrediting agency recognized by the United States Department of Education, responsible for awarding academic credit and educational credentials to its students and maintaining transcripts for such students:

The undersigned acknowledges that Applicant is required to notify the Secretary of State Office within thirty (30) days of a change in information set forth in this Application, including any changes in information set forth in any Attachments or other accompanying information. The undersigned has executed the foregoing document and, under penalties of perjury, certifies that the information provided herein, and in support thereof, is true and correct.

The application must be signed by an authorized officer of the postsecondary educational institution:

_{Dated} June 10, 2014

(Signature of an authorized officer)

Dr. Alexandra Gregory

(Printed name)

Associate Provost for Academic Affairs

(Title)

Submit Application to:

South Dakota Secretary of State Corporations Division 500 East Capitol, Suite 204 Pierre, SD 57501

Or email us at: SOS.EDU@state.sd.us

Exemptions

If the institution falls under one or more of the following categories, the institution is exempt from registering.

- Established by the government of the United States;
- Established by the government of an Indian tribe whose tribal lands are located, in whole or in part, in South Dakota;
- Established, owned, controlled, operated, and maintained by a religious organization lawfully operating as a nonprofit religious corporation and awarding only religious degrees or certificates for the purpose of conferring clerical status or authority within that religion; or
- Subject to the jurisdiction and regulations to the South Dakota Cosmetology Commission.

ATTACHMENT A

ADDITIONAL SITES AT WHICH APPLICANT OPERATES EDUCATIONAL PROGRAMS

(Must be accompanied by an Application for Certificate of Authorization to Provide Postsecondary Education)

1. (Name)		
102 Mustang Drive		
(Street Address)	,	
Coraopolis	PA	15108
(City)	(State)	(ZIP Code)
Coal Center, Intermediate	Unit #1	
(Name)		
One Intermediate Unit Dri	ve	
(Street Address)		VIII
Coal Center	PA	15423
(City)	(State)	(ZIP Code)
Fort Indiantown Gap		
(Name)		
Education Guidance Offic	e, PA Army National Guard,	Building 9-43
(Street Address)		
Annville	PA	17003-5002
(City)	(State)	(ZIP Code)
4.		
(Name)		
(Street Address)		
(City)	(State)	(ZIP Code)
Note: We are approved to offer education as these additional local active.	ucational programs by the Middle S tions. We are submitting these loca	tates Commission on Higher tions which are currently